

ELIZABETH STUART PHELPS (1844-1911): THE PRESENCE OF MEDICAL SUBJECTS IN HER LITERARY WORKS

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Elizabeth Stuart Phelps (1844-1911) was once recognized as “one of the most famous of American authors” (Vedder 189), achieving “an international reputation, her output transcending our academic separations of ‘popular,’ ‘journalistic,’ and ‘belles-lettres’ writing” (Kessler ii); but later she has been unjustly relegated to a quite secondary position.¹ Nevertheless, it is interesting to study her not only due to the quality of her writings but also because her own life and the content of her literary works portray the changes that were taking place with respect to women’s lives in the second half of the nineteenth century. Her outstanding fame in the past was mainly based on her successful religious novel *The Gates Ajar*, but scholars should also pay more attention to the rest of her writings, which constitute a very illustrative testimony of the developments of her historical context.²

Concretely on this occasion, Phelps has been chosen because she included in the American feminine literature of her times an important innovation by allowing some space to the presence of medical issues and specific women doctors in her fiction. They constitute just one example of the “New Women” that Phelps really liked to show in her writings, as a way of inviting her female readers to act in a similar way and to break with restrictive traditions. As Mary Angela Bennett declares,

Her [Phelps’s] fiction gives instances of women successfully entering a great variety of spheres. There is the woman preacher of “A Woman’s Pulpit,” the brilliant college girl of “The Sacrifice of

¹ Scholar Ronna Coffey Privett, who has recently written a book on Phelps entitled *A Comprehensive Study of American Writer Elizabeth Stuart Phelps, 1844-1911; Art for Truth’s Sake*, expresses her astonishment at Phelps’s fame falling into oblivion, as she declares: “While investigating Phelps, I was amazed that she had written so many novels and had been so popular before fading into obscurity in the early twentieth century” (xiii).

² Elizabeth Stuart Phelps published more than fifty books, and plays, verse, essays, articles for some of the main magazines of her time and biographies.

Antigone,” the philanthropist of “The Autobiography of Aureola,” and the telephone girl of “The Chief Operator,” to name but a few of her shorter sketches. (60)

Bennett makes reference to Phelps’s short fiction, but we should also add her book-length writings populated with heroines whose lives are dedicated to different professions, such as a woman painter, in *The Story of Avis*; an entrepreneur, in *The Silent Partner*; and a woman doctor, in *Doctor Zay*, to mention some of them.³

However, it is not only Phelps’s fiction that gives testimony of her interest in Medicine: she also wrote essays and articles trying to teach women how to improve their health and even that of their potential patients by encouraging them to become medical professionals. In those writings, for example, Phelps explained to her female readers the unhealthy effects of some of their imposed habits, such as the wearing of corsets and heavy dresses, and the pernicious results of their sedentary lives. Although she was particularly displeased with the stultifying and crystallizing effects of the then fashionable dresses upon women,⁴ attention will be specially paid here to her concern for their negative consequences for the ladies’ health. Even if Phelps was not the only woman writer who was active in urging dress reform, she stood out among them, as the very fact of being invited to give lectures on the subject demonstrates. Thus, in the spring of 1873, after addressing the New England Woman’s Club on the subject of dress reform in its relationship to economics, morals, and health, basing her message on the columns she had already published in the *Independent* in May of that same year, she reprinted it with some additions in her book *What to Wear?* Here, without hiding her preference for women doctors, she declares that if you asked a good male doctor about the effects of Victorian clothes, he might simply recognize those, but, as he would not give this matter a lot of relevance, he would not make women abandon them immediately (67). Phelps counteracts that if you made this consultation to a woman doctor, she would specify in a very detailed way all the harm that those dresses cause, and so she would urge you to discard them in order to avoid premature death (68). More specifically, she asserts: “If you chance upon such a woman physician as you are more than likely to chance upon, [. . .] she will give

³ Women with medical vocations appear also in two short stories written by Phelps: “Our Little Woman” and “Zerviah Hope.”

⁴ Phelps was an advocate of women’s improvement in every sense, not only with respect to their health. Thus, she considered that the heavy and tight dresses they had to wear constituted a big obstacle for their full development. We can see that, for example, in this quotation taken from one of her articles: “Progress of [. . .] the sex is seriously impeded by the abuses of their dress” (“The Decollété” 676).

you [. . .] a list of simple and alarming facts about the effects which it is reasonable to expect that your dress is having, or might have, upon you" (65); later, she details this "list": "Each and every process of respiration, of circulation, of digestion, and assimilation, of waste and renewal, of brain and nerve action, necessary to the healthy condition of the human body, is distorted in the woman's body under the influence of the woman's dress" (68).⁵ She proved to be practicing what she defended by wearing what she advocated, as, in that same year, she wrote to John Greenleaf Whittier, from Gloucester: "You should see us down here in our beach dresses –short, loose and not uncomely to my fancy" (qtd. in Bennett 65).

Phelps's knowledge and interest in medical subjects had been very possibly generated by her own chronic illness and invalidism, but also by her close relationship with a woman doctor, Dr. Mary Briggs Harris, with whom she shared rooms for some time. Dr. Harris was a member of the second graduating class of Boston University School of Medicine, which Phelps admired and considered a model of coeducation, demonstrating that it could be implemented without transgressing the Victorian morality. But Dr. Harris was not the only woman doctor with whom Phelps had contact, for she recognizes this fact several times; this is one of her assertions in that respect, addressed to the renowned physician S. Weir Mitchell (1829-1914): "I have directly, or indirectly, been the means of putting four young women into the profession; who have all honored it, so far" (qtd. in Tuttle 87-88).⁶ She utilized this argument also to reinforce and give more credibility to her encouraging of women in order to become doctors, thus confronting Dr. Mitchell's opinion that "women could not be effective physicians because they were by nature too weak and submissive to master the patient's will", as Tuttle explains (84).⁷ Phelps even told him that she would "entrust 'Doctor Zay' to [his] professional courtesy" (qtd. in Tuttle 84), surely with the intention of showing him an example of the goals a woman doctor could accomplish. This can be inferred from other statements like this one, where Phelps admonishes him: "I should take you to task a little for what you say of women physicians. It doesn't seem to me quite fair; or else you really don't know! and most men-Doctors do not" (88).

⁵ Nevertheless, Phelps complained in *What to Wear?* that in a Medicine school class, only two female students out of twenty five dressed in a healthy way (65).

⁶ As Tuttle asserts, Phelps wrote letters to Dr. S. Weir Mitchell dealing with several issues related to Medicine such as the virtues of women physicians, the superiority of homeopathic medicine, and her own personal health problems (83).

⁷ Dr. S. Weir Mitchell is best known for the "rest cure" he recommended as a treatment for women who *apparently* suffered from hysteria or neurasthenia. For more information about Dr. Mitchell's rest cure, see Suzanne Poirier's "The Weir Mitchell Rest Cure: Doctor and Patients."

In addition, Phelps must have been motivated to write about topics dealing with Medicine by her ample knowledge of the medical practice of her time. Considering this, it is easy to understand, for example, the reasons that lead Phelps to demonstrate her disagreement with surgery: practitioners abused of its use, especially in the case of women, even when the roots of their problems were not other than psychological or nervous. Some researchers have recognized this fact in their studies, and the present essay is taking them into account in order to show evidence of the theories hereby explained. From among them, the following testimony given by Barbara Ehrenreich and Deirdre English is brought to focus:

It was the field of gynecological surgery that provided the most brutally direct medical treatments of female “personality disorders.” After all, if a woman’s entire personality was dominated by her reproductive organs, then gynecological surgery was the most logical approach to any female psychological problem. (103)

Instead of surgical procedures, Phelps recommended in her writings homeopathy, stays in health resorts, vegetarianism, walks in nature, physical exercise, and all practices that might shun bloody cures.⁸ Phelps associated the latter and the practice of surgery with male doctors, and her opinion is shared by other writers such as the author of *The Ways of Women in Their Physical, Moral and Intellectual Relations, by a Medical Man* (1873), who asserts that women doctors usually tried to avoid surgery (407).⁹ Phelps’s novel *The Gates Between* (1887) and its play version, *Within the Gates* (1887), both echo the criticism that male surgeons received sometimes with ironic and humoristic touches, as the male doctors insists on operating for appendicitis on a patient who suffered from pleurisy. Logically, the latter maintains that he had got over the pain and tries hard to avoid surgery. One of the doctors exclaims then to his partner: “Irritable! Very irritable! A significant symptom, Dr. Gazell. In my opinion, this extreme irritability demands an operation for appendicitis” (*Within the Gates* 47).¹⁰

⁸ In a letter addressed to Dr. S. Weir Mitchell, she overtly declares: “I am a devout homeopathist” (qtd. in Tuttle 84).

⁹ Although this book is anonymous and its title indicates that it is written “By a Medical Man”, we suspect that the author is a woman due to the opinions and points of view that it includes, which tend to favor females.

¹⁰ Phelps did not like surgery even for animals, and her writings against vivisection were quite frequent. Some of them are based on her speeches addressed, for example, to the Legislative Committee of Massachusetts. Her position in this respect is also shown in her short story “Loveliness” (1899) and her novel *Trixy* (1904). In both of them the plot deals with the recovery of pet dogs from the research laboratory of a medical school. Apart from fictional writings, there are also several pamphlets dealing with this subject, such as *A Plea for the Helpless* (1901), *Vivisection*

Considering the analysis presented so far in this paper, nobody would be surprised by the fact that Phelps did not conceal her preference for women doctors. This becomes even more evident when considering the writer's reactions to some of the dictates and assertions created by male ones. One of the outstanding instances is her response to the then famous Doctor E. H. Clarke (a Harvard Medical School professor), author of *Sex in Education: or, a Fair Chance for the Girls* (1873), who defended the opinion that higher learning provoked pernicious effects on women. Instead of the old-fashioned solutions that he proposed for women's listless states, Phelps explained that women were healthier while occupied at school and less so when they had to pay attention to everyday domestic tasks against their will ("A Response" 126-38). She is even more emphatic in "A Word for the Silent", where she declares: "Thousands of women will not believe what the author of 'Sex in Education' tells them, simply because they know better [. . .]. Every healthy woman physician knows better; and it is only the woman physician, after all, whose judgment can ever approach the ultimate uses of the physicist's testimony to these questions" (1633).¹¹ Phelps was not alone in the defense and recommendation of working activities for women, as there exist more examples of female writers who shared and dared to publish similar opinions. Mary Wollstonecraft's *A Vindication of the Rights of Woman* (1792), one of the classic icons of the fight for the equality of the sexes, might have inspired Phelps and some of her contemporary writers, among whom is Mary Edwards Walker (1832-1919). She made this declaration referred to women—which seems rather a prediction—in *A Woman's Thoughts about Love and Marriage, Divorce, etc.* (1871): "Labor of some kind is just as much a necessity to the abiding happiness, as is bread to existence. The years are not distant, when the truth of this will be realized by every human being" (148). In fact, in 1882, Phelps shows in *Doctor Zay* an observation about her heroine that is consistent with the content of the quotations above and that contradicts—now in fiction—Dr. Clarke's pernicious considerations: "The doctor enjoyed her terrible work. [. . .] She had bread to eat that he [Yorke] knew not of. He could

and Legislation in Massachusetts (1902), and Vivisection Denounced (1902). Carol Farley Kessler considers that Phelps's opposition to vivisection appears to be an indirect expression of her feminist interests (111). Kessler gives many reasons to support her suspicion. From among them, we would bring to light the fact that Phelps frequently uses a terminology that might make reference to the vivisection of animals when she is talking about the relationship between men and women. This is quite evident in this fragment taken from her novel *Though Life Us Do Part* (1908), where Phelps observes, regarding the risks for a woman in marrying: "A man may vivisection a woman nerve by nerve, anguish by anguish; nobody knows it. She never cries out" (56).

¹¹ For commentaries on Phelps's reply to Dr. Clarke's proposals, see Cynthia J. Davis (91-96).

not think of her as sinking, dejected, in need, ahungered. Her splendid health was like a god to her. [. . .] She had the repose of her full mental activity” (110-11).

For a better understanding of Phelps’s strong reactions to traditional and male medical practice and of her alternative proposals, it is necessary to locate her writings in a wider historical context, illustrating, for example, how medical activities were not anything new to nineteenth-century women. They had managed to treat their relatives from the very foundation of the first American colonies, when they applied household remedies prepared with herbs and other natural ingredients, as Paul Starr confirms making reference to those pioneers:

Lay practitioners, using native herbs and folk remedies, flourished in the countryside and the towns, scorning the therapies and arcane learning of regular physicians and claiming the right to practice medicine as an inalienable liberty comparable to religious freedom. (31)

In fact, as Michael Sartisky also states, the participation of women in medicine was crucial earlier than the 19th century, before they suffered from the effects of the restrictions brought by the Victorian model of the “true woman”. In this respect, it should be added the fact that in those years the possession of a license certifying the professional skills and training of the physicians was not required for the practice of medicine.¹² Sartisky explains the situation with these words: “Until the early nineteenth century women dominated both midwifery and the lay practice of medicine, serving remote communities, plantations, and even acting as surgeons in the Revolutionary War” (268). Later, the *bravest* ones entered the male dominated arena of the “official” medical profession. The expression “the bravest” has been used because this initiative was not then considered something appropriate to respectable women: they might take care of and improve the health of others but only in the domestic sphere or as a voluntary activity; when the public sphere and economic interests were considered, their society rejected them (Ehrenreich and English 41). A fictional example of how strange it was for the Victorian society to consider a medical career for a woman is portrayed in Phelps’s “Our Little Woman” (1872). In this short story, the female protagonist, who decided to become a physician once her mother had died, faces the incredulous reaction of her cousin, who, after mentioning some obstacles like her lack of money and education, reveals her: “And nobody believes in women doctors!” (733-34).

¹² Sartisky specifies that “by 1850 most of the licensure laws fell into decline; licensure did not reassert itself as an actual force until the last decades of the nineteenth century” (269).

In effect, there were actual barriers to such a pursuit: almost none of the forty-two medical schools which existed in 1850 admitted women as students. Furthermore, the process of professionalization of the medical activities, which is considered to have an adverse impact on the position of women in the United States society, had begun by mid-18th century. It was then when Dr. William Shippen gave the first lectures on birth assistance in Philadelphia (where it is believed that the first medical school was founded in 1765) (Sartisky 266). From then on, this discipline generated more schools, so that they grew from forty-two in 1850, to one hundred thirty-one in 1890 (Starr 99). Medical schools not only increased in number: they also became more specialized, which required new institutions, such as the American Ophthalmological Society (1864), the American Gynecological Society (1876), and the American Pediatric Society (1888). This led to a better training of future doctors and an increase of their prestige, with the subsequent growth of their adulation, which reached extremes described by Burton J. Bledstein: "The professional appeared in the role of a magician casting his spell over the client and requiring complete confidence; and the client listened to words that often sounded metaphysical and even mystical" (94). Phelps proved to be very faithful to all the characteristics of doctors, as she also portrays in *Doctor Zay* a female medical professional with attributes that seem almost divine, surely with the intention of "promoting" this vocation among women: "She had the mysterious odic force of the healer, which is above science, and beyond experience, and behind theory, and which we call magnetism or vitality, tact or inspiration, according to our assimilating power in its presence, and our reverence for its mission" (98-99).

One of the first brave women that entered this "masculine sphere" of the professional practice and medical education was Elizabeth Blackwell (1821-1910), who managed to study at Geneva Medical College in 1847, despite her male partners and teachers' rejection. This was very common, as it can be inferred from the content of this fragment taken from *The Ways of Women in Their Physical, Moral and Intellectual Relations, by a Medical Man*: "A standing army of medical men have opposed the movement. They have thrown every imaginable obstacle in the way. Not only have they refused to admit them as pupils into schools of medicine, but they have denounced and ridiculed those who have expressed sympathy for them in their desire to be medically educated" (404).

The positive effects of these first women students of Medicine's attitudes could be noticed in concrete innovative academic initiatives such as the foundation of new feminine schools; for instance: the New England Female Medical College of Boston (1848), the Female Medical College of Pennsylvania (1850), the Homeopathic New York Medical College for Women (1863), and the

Women's Medical College of New York Infirmary (1868), founded by Elizabeth Blackwell herself. Some years later, in 1873, women could complete their studies in the first "training schools": Bellevue Hospital (New York City), Massachusetts General Hospital (Boston) and Connecticut Hospital (New Haven). These schools kept on multiplying so much that in 1890 there were thirty-five able to give professional diplomas to their female students.

Nevertheless, some women considered that, instead of schools specifically created for them, they should be admitted in the same schools that men attended, in order to receive equal education and training. As previously mentioned, Phelps was one of the advocates of coeducation; declarations like the following one illustrate this: "Until men and women are made doctors under identical disciplinary conditions, women physicians will never be, as a class, equally fitted with men to command the public confidence, and will never equally receive it when they are thus fitted" ("Experiment" 1). Phelps promoted coeducation not only in her articles, but also through her fiction: the positive effects of partnership among male and female students and colleagues are highlighted in Phelps's short story, "Zerviah Hope". Here, a woman doctor, Dr. Marian Dare, is depicted working with two male doctors, one of whom significantly "spoke to her with an air of *camaraderie*" (78).

Phelps's works serve in some instances as catalogues of the diverse options at which women with medical vocations could aim. Among these alternatives, there existed homeopathic schools also known as "Eclectic schools", where the theories of its founder, the German Samuel Hahnemann (1755-1843), were learnt. Predominance was given to the belief that illness was very closely connected to the spirit, so that "what occurred inside the body did not follow physical laws" (Starr 96). Besides, homeopathy emphasized sympathetic and individualized attention on the part of the doctor towards the patient (Starr 96-97).¹³ Many high-class women preferred homeopathy instead of conventional Medicine, something that they might have inherited from the 18th-century aristocratic medical practice, which promoted personal treatment and contact with the patient more than the action of drugs. This preference on the part of the feminine sphere for homeopathy can be noticed in many of Phelps's articles, but also in her fiction; in *Doctor Zay*, the male patient is happy to be treated by a homeopath only to satisfy his mother, and not because he prefers this kind of medical practice: "My mother will be so glad! . . . She would never have been able to bear it, if I had died under the other treatment. Women feel so strongly about these things. I am glad to know that –for her sake– poor mother"

¹³ For a detailed discussion about homeopathy in America, see Martin Kaufman, *Homeopathy in America*.

(39). According to Sartisky, the heyday of homeopathy was the decade of 1880-90, despite many attacks it received from conventional doctors.¹⁴

In any case, according to the heretofore exposed historical and textual evidence, we are led to consider that at least the first step, the academic education of women who wanted to become doctors, although with a lot of effort, was reached. Their professional acceptance, however, had to face many more obstacles. That is the logical inference that derives from the hard experience of the first professional woman doctor, Elizabeth Blackwell.¹⁵ To reach her professional goals, Blackwell had to resort to conventional Victorian considerations associated with women, to facilitate the access to a medical job not only for herself, but also for women in general, alluding to their suitability, because of their "God-given maternal nature" (Douglass 76). Justifications similar to this one can be found in *The Ways of Women in Their Physical, Moral and Intellectual Relations, by a Medical Man*, which reads:

The novelty wore off, and next it was ascertained that [women doctors'] manner of intercourse with invalids, the delicacy of their approach, the carefulness with which investigations were conducted, the accuracy of their analysis of symptoms, and their judgment in the administration of remedies, inspired confidence. (406)

In this quotation, typically feminine characteristics and virtues are emphasized in women doctors, as an attempt to demonstrate that these ladies did not risk or lose their most inherent attributes merely because they worked outside their houses. A comparable message is latent in Phelps's *Doctor Zay*, where she even "allows" the protagonist to be an attractive lady, as these words pronounced by Mrs. Buterwell suggest: "She has such a spirit! You'd expect it if she wasn't smart. When a woman ain't good for anything else she falls back on her spirit! You don't look for it when she's got bigger fish to fry. But there! There's more woman to our doctor than to the rest of us, just as there's more brains" (86).¹⁶

¹⁴ However, the main "enemy" of homeopathy was the development of traditional or regular Medicine thanks to outstanding scientists such as Louis Pasteur (1822-1895); their work was very effective, as the decrease of child deaths from 273 per thousand in 1885 to one third of that amount in 1915 demonstrates.

¹⁵ Blackwell's experience was dramatized in *The Advocate*, in 1850, with a short story designed to encourage its female readers to dedicate themselves to Medicine, presenting it as a very appropriate occupation for them (Smith-Rosenberg 124). She was helped in her professional purposes by Emma Willard, an advocate of women's rights and founder of Troy Female Seminary, who wrote to the executive committee of New York asking for the influence of its members in order to give Blackwell a job as a doctor.

¹⁶ Let us now remember that many of the women who wanted to go to the front as nurses during the American Civil War used this resourceful reasoning based on Victorian conventions and this proved

Although women managed to enter the medical sphere, it seems evident that in that field they were also affected by the patriarchal hierarchy that ruled the whole society; according to this, the custom was that female nurses were obliged to obey male doctors almost blindly. Once again, Phelps, always willing to portray all the circumstances in which her contemporary women lived, serves as a nineteenth-century chronicler for us. In her novel *Within the Gates*, she presents a very good example of the situation previously described, as there is a moment when the nurses, although having diagnosed the illness of a patient better than the doctors, are compelled by them to be quiet with these words: "The nurse, as you have been taught in your training-school, can have no opinions" (44-5).

The case of midwives was a different one as they kept a certain degree of independence within hospital life and its hierarchy. Many of them even travelled to Europe to be trained and enjoyed much respected positions in rural areas. Their relevance was such that when the first generations of academic nurses and women doctors appeared, they were automatically associated with activities connected to pregnancies, births and, by extension, to everything related to women's health. Consequently, at first, men were afraid of being treated by a woman doctor instead of by a man, a feeling that is manifest in Waldo Yorke, the male protagonist of *Doctor Zay* (43). However, Dr. Zaidee Atalanta Lloyd's excellent practice and the information that Yorke receives about her medical training and experience leads him finally to recognise: "I begin to trust you" (46), even though "all the man in him rebelled at her authority" (60).¹⁷ *The Way of Women* confirms how strange it was at the beginning for the Victorian society to become familiarized with women doctors: "The idea of female physicians was a novelty at first, and so strange too, as none but men were practitioners of medicine, it looked like overturning the

effective to many of them. So much was this the case that we have to look back to the American Civil War when trying to discover the origins of the medical profession for women, as this conflict required the services of many women who offered their help as volunteers in both fighting sides. Curiously, in order to avoid the social rejection that women doctors normally suffered (and other suspicions and prejudices), they asked for females older than 30 years and "plain in appearance" (Evans 114).

¹⁷ The information that Phelps offers in *Doctor Zay* about her own academic education and training is also useful to reconstruct the history of women doctors. Doctor Zay answered to Yorke's question "But where did you get your medical education?" by saying: "At New York, Zürich, and Viena" (74). Later, he asked: "How many years did you study?" and she told him: "Three years are necessary to a diploma from any reputable school. The fourth I spent abroad. But of course one always studies" (79). Thanks to Yorke's interest and curiosity, Phelps, through Dr. Zay, gives us more information about women doctors at the end of the 19th century: "Among the thousand of us now practicing medicine in this country, there are many more successful than I, and abroad there is some superb work done. I should like to give you the figures some time" (164).

constitutions of society when women were feeling pulses" (406). That might be the reason why this same book makes it perfectly clear and emphasizes the fact that women could obtain the degree that the medical profession required: "Medical colleges have been chartered, in all directions, for the special purpose of qualifying them, scientifically, to take upon themselves the responsibilities of that important profession" (404).

Despite all these hindrances, the peak of success of women doctors took place after the American Civil War, when the number of male and female doctors experienced the biggest growth. It was then, for example, when seventeen medical schools for women were founded. As a consequence, the amount of women doctors increased from 200 (0.4% of the whole quantity of doctors) in 1860, to 2,432 (2.8% of the total) in 1880; they were 7,387 (5.6% of the total amount) in 1900. However, the 20th century was not so beneficial for women, for, according to Sartisky, in 1909 the proportion of women doctors decreased by 35% compared to those existing in 1894. Maybe the reason for it can be found in Mary Angela Bennett's words: "The only career really open to women at that time was marriage. Women doctors were just beginning to be heard of –with shudders" (225-26). This seems to represent the difficult challenge that "new women" had to face: how to combine family and professional life. This is the theme that appears in Phelps's writings and in other literary works by authors of her time such as William Dean Howells, who wrote *Doctor Breen's Practice* (1881), where the protagonist gives up her medical profession in order to get married; Sarah Orne Jewett, who made her woman doctor of *A Country Doctor* (1884) reject her lover and pursue her career; and Annie Nathan Meyer, in whose writing, *Helen Brent, M. D.: A Social Study* (1892), the protagonist dedicates her life to her profession because of the lack of a suitable partner. It is significant that in all these novels, including *Doctor Zay*, there is estrangement between the protagonists and their families. Sartisky interprets this as the result of the Victorian idea that women should work only out of necessity; or the more modern consideration that, in order for women to avoid the rigid margins of the "true woman", they needed to move away from the influential area of those who encouraged it, a region where the family normally was. Nevertheless, a particularity is detected in Phelps's writings: in many of them, it is precisely the influence of the protagonist's mother (normally already dead) what motivates her to take the brave path her mother had not been able to fulfil or had wished her daughter to follow. This is a constant, for example, in *The Story of Avis* (1877), in *Doctor Zay*, and in "Our Little Woman."¹⁸

¹⁸ In the case of *Doctor Zay*, the effect of the protagonist's family, although already absent, is a positive one, as Doctor Zay has inherited her medical calling from her father, who had also been a physician.

Taking the information here exposed into account, *Doctor Zay* (1882) is set in a period of time when women had already gained access to medical academic training but in which women doctors were not as frequent as their male homologues. That explains why Phelps considered it so necessary to encourage women to become doctors, as we can see in her writings dating from 1867 approximately. One of the best examples of this aim appears in “What Shall They Do?” (written in that same year), where Phelps declares that medical assistance is one of the professional activities that best suits women, thus trying to avoid the reluctance of conservative Victorians towards them: “[Can you] take care of an invalid? Go into the hospitals? Be a doctor? And be sure that you could be few things more womanly or more noble” (523). However, in this same article, she includes some pieces of information which demonstrate that by that time, the path for women with professional vocations as doctors had already been opened, as Phelps affirms:

The brave pioneers –God bless them for it!– have broken the way for you. It is an easier way now than the path of the idle or the ill-paid. The day is coming, yea, and now is perhaps, when strong, and generous, and refined women will be as anxious to crowd into it as they have been to keep out of it. (523)

This fact can be corroborated by this assertion published in *The Ways of Women*, which reminds us of Phelps’s words: “The partition-wall has given way, which prevented the advance of enterprise in law, medicine, and theology. These professions are now open for all who are qualified to sustain themselves in them” (407).

The logical conclusion derived from all the details here analyzed and many others included in Phelps’s writings lead inescapably to state that she had a very keen interest in improving women’s lives even from inside, beginning by bettering their health. These reflections should help to recognize the real value of Elizabeth Stuart Phelps’s contribution to literature and the reform of her patriarchal society. This facilitates a fairer judgment of her as a very qualified writer, not only of sentimental and religious novels, but also of literary works which belong to other genres and contain important messages like those referring to Medicine here studied. These were addressed to female readers *and* to the whole of society, which she was yearning to transform, in order to make women healthier in a literal and in a metaphorical sense. The purpose of this essay has also been to outline the manifold pieces of information that Phelps has bequeathed not only to her readers but also to the historian who tries to reconstruct the past of the medical discipline in America, a professional vocation in which, despite the hazardous and intricate adventure that it often constituted to

women, many females stood out and excelled, thanks in part to the help and support given by writers like Elizabeth Stuart Phelps.

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